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Bib Data Sheet

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** CONTINUING DATA *****

Noc

** FOREIGN APPLICATIONS *****

Noc

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>Noc</i> | CA | 21 | 22 | 5 |

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TITLE

Method of using modified oligonucleotides for hepatic delivery

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|-----------------------------------|---|--|
| FILING FEE RECEIVED 537 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
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